

Robin Carnahan Secretary of State
2006 ANNUAL REGISTRATION REPORT
NONPROFIT

File Number: 200617390568
N00067375
Date Filed: 06/22/2006
Robin Carnahan
Secretary of State

REPORT DUE BY: **08/31/2006**

ORGANIZED UNDER THE LAWS OF:
Missouri

N00067375
THE LOOP TROLLEY COMPANY
BENJAMIN UCHITELLE
41 CRESTWOOD DR
ST LOUIS, MO 63105

1 **PRINCIPAL PLACE OF BUSINESS OR CORPORATE HEADQUARTERS:**
6504 Delmar Blvd.,
STREET
St. Louis, MO 63130
CITY/STATE ZIP

If changing the registered agent and/or registered office address, please check the appropriate box(es) and fill in the necessary information.

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The new registered agent

IF CHANGING THE REGISTERED AGENT, AN ORIGINAL WRITTEN CONSENT FROM THE NEW REGISTERED AGENT MUST BE ATTACHED AND FILED WITH THIS REGISTRATION REPORT.

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The new registered office address

Must be a Missouri address, PO Box alone is not acceptable. This section is not applicable for Banks, Trusts and Foreign Insurance.

OFFICERS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). **MUST LIST AT LEAST ONE OFFICER BELOW.**

PRES **Joe Edwards**
STREET/RT 6504 Delmar Blvd.
CITY/STATE/ZIP St. Louis, MO 63130
V-PRES
STREET/RT
CITY/STATE/ZIP
SEC'Y
STREET/RT
CITY/STATE/ZIP
TREAS
STREET/RT
CITY/STATE/ZIP

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS ARE ATTACHED

BOARD OF DIRECTORS

NAME AND PHYSICAL ADDRESS (P.O. BOX ALONE NOT ACCEPTABLE). **MUST LIST AT LEAST THREE DIRECTORS BELOW.**

NAME **Joe Adams**
STREET/RT 924 Wild Cherry
CITY/STATE/ZIP University City, MO 63130
NAME Robert Archibald
STREET/RT Missouri Historical Society
P.O. Box 11940
CITY/STATE/ZIP St. Louis, MO 63112
NAME Kim Tucti
STREET/RT 1143 Macklind Ave.
CITY/STATE/ZIP St. Louis, MO 63110
NAME Don C. Musick
STREET/RT 254 Hanley Industrial Court
CITY/STATE/ZIP St. Louis, MO 63144

The undersigned understands that false statements made in this report are punishable for the crime of making a false declaration under Section 575.060 RSMo. Photocopy or stamped signature not acceptable.

Authorized party or officer sign here

Joe Edwards

(Required)

Please print name and title of signer:

Joe Edwards / president
NAME TITLE

REGISTRATION REPORT FEE IS:

___ \$10.00 If filed on or before 8/31

___ \$15.00 If filed after 8/31

Corporation will be administratively dissolved if report is not filed by November 30th.

WHEN THIS FORM IS ACCEPTED BY THE SECRETARY OF STATE, BY LAW IT WILL BECOME A PUBLIC DOCUMENT AND ALL INFORMATION PROVIDED IS SUBJECT TO PUBLIC DISCLOSURE

E-MAIL ADDRESS (OPTIONAL) _____

REQUIRED INFORMATION MUST BE COMPLETE OR THE REGISTRATION REPORT WILL BE REJECTED

MAKE CHECK PAYABLE TO DIRECTOR OF REVENUE

RETURN COMPLETED REGISTRATION REPORT AND PAYMENT TO THE SECRETARY OF STATE - P.O. BOX 1366, JEFFERSON CITY, MO 65102

Robin Carnahan Secretary of State

2006 ANNUAL REGISTRATION REPORT

NAMES AND ADDRESSES OF ALL OTHER OFFICERS AND DIRECTORS:

OTHER

BEN UCHITELLE
41 CRESTWOOD DR.
ST. LOUIS, MO 63105

DIRECTOR

DESMOND LEE
UMSL, 8001 NATURAL BRIDGE ROAD
ST. LOUIS, MO 63121